

## Effectiveness of Ayurveda in Nephrotic Syndrome w.s.r. to Vrikkajanya Sankarya: An Evidence-Based Case Study

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As far as Nephrotic Syndrome is considered, it mainly manifests with major protein loss through urine as a cardinal symptom which can be associated with Vrikkajanya Vikara, which is referred to as a type of renal disorder/Vrikka Vikara. A 24-year-old female presented with left lumbar pain, pus in urine, burning micturition, and proteinuria (3+). On the basis of Dosha assessment, Rasayana, Stambhaka, and Mutral Dravyas like Gokhru, Giloy, Chandraprabha Vati, and Ushirasava, including some dietary modifications, were prescribed for two months. Mild improvement was seen in follow ups. This case signifies the importance of early diagnosis and planned ayurvedic interventions in NS to take preventive measures and to keep away from complications and to improve quality of life.

**Keywords:** Nephrotic syndrome, membranous glomerulonephropathy, Ayurvedic treatment, proteinuria, chronic kidney disease

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## Introduction

A clinical condition known as Nephrotic syndrome has the characteristics of significant proteinuria, hypoalbuminemia, hyperlipidemia, and edema. Focus of this report is on a young female patient who is diagnosed with nephrotic syndrome with an underlying membranous glomerulonephropathy which is confirmed by kidney biopsy. The case signifies the utility of integrative medicine in managing persistent and recurrent symptoms.

## Case Report

### November 2024

A 24-year-old female presented with:

#### Chief complaints:

- Left lumbar pain for 7–8 months
- Burning micturition
- Excessive pus in urine

#### Investigations:

Investigations - Urine profile	November 2024	Follow up December 2024	Follow up January 2025
Urine protein	3+	3+	3+
Leucocyte esterase	Positive	Positive	Positive
Pus cells	7–8 HPF	14.70	12.40
Bacteria Cocci	349/HPF	262/ HPF	36.90
Mucus	630	1306	81.00

**Kidney Biopsy: 13/07/23** - Membranous glomerulonephropathy, anti-PLA2R positive

## Materials and Methods

**Initial Treatment:** The patient was started on the following Ayurvedic medications:

<b>Giloy Kwath</b>	100ml BD	Empty stomach
<b>Gokhru Kwath</b>	100 ml BD	Empty stomach
<b>Tab. Renogrit</b>	2 tab BD	Before meal
<b>Tab. UTInil</b>	2 tab BD	Before meal
<b>Chandraprabha Vati</b>	2 tab TDS	After meal
<b>Vrikkdoshar Vati</b>	2 tab TDS	After meal
<b>Usirasava</b>	Equal amount of water BD	After meal

### December 2024:

The patient returned with the following persistent complaints:

- Excessive pus in urine
- Burning micturition

- Weakness
- Dizziness
- Facial swelling in the morning

**Revised Treatment:** The treatment plan was adjusted to address the worsening symptoms:

UTInil	1 tab TDS	After meal
Basantkusumakar Ras	1 TSP TDS	After meal
Hazralyahud Bhasma		
Pushyanug Churna		
Sphatika Bhasma		
Punarnavadi Mandoor	2 Tab BD	After meal

### January 2025:

During the follow-up in January 2025, the patient reported mild symptomatic relief. However, her primary complaint of pus in urine persisted.

**Final Treatment:** The medications were further optimized:

Chandraprabha Vati	2 tab bd	After meal
UTInil	1 tab BD	After meal
Basantkusumakar Ras	1 tsp tds	After meal
Hazralyahud Bhasma		
Pushyanug Churna		
Sphatika Bhasma		
Chandrakala Ras	1 tab TDS	After meal
Chandanasava	Equal amount of water BD	After meal
Neeri KFT		

## Result

By the end of January 2025, the patient reported significant improvement in symptoms, with noticeable relief in urinary complaints. Investigations indicated a reduction in bacteria cocci and mucus levels, though proteinuria (3+) persisted.

## Discussion

This case highlights the chronic nature of nephrotic syndrome and its associated complications. The integration of Ayurvedic formulations, including herbal decoctions, mineral-based preparations, and dietary adjustments, appeared to complement symptom management effectively.

*Chandraprabha Vati* helps to balance the *Doshas*, improves metabolism and support urinary system health.[1] *Ushirasava* having antibacterial properties, destroys bacteria in urinary tract causing infections & provides relief from painful urination.[2]

Neeri KFT have antioxidant mechanism which alleviate renal and improve kidney function through reducing inflammation.[3]

*Chandanasava* is highly effective against several bacterial infections, this controls the progression of disease in pt. suffering from UTI and pyuria.[4]

*Punarnavadi Mandoor* contains drugs that improve liver functioning which is very useful to remove toxins from the body. So, there is proper functioning of *Rasa Dhatwagni* and *Raktadhatwagni* which is a very important factor to cure the disease.[5]

*Gokhru Kwath* - contains *Yavakuta* powder of *Gokhru*. Its ethanolic extract has already proved as hepatoprotective and nephroprotective action.[6]

Renogrit tablet - Since, NS has a *Pitta* dominant *Tridosha* in its pathology, Renogrit is a compound containing extracts of *Varun*, *Kasni*, *Pashanbheda*, *Punarnavamoola*, *Gokshur*, *Varuna*, *Apamarg* specifically has *Pitta Shamaka* properties, *Tridosha*hara *Guna*, *Madhur Vipaka* with *Mutral* properties and having *Tikta Rasa* predominant drugs, having properties of igniting *Jatharagni* to correct out the invariably presenting *Mandagni* in NS.[7]

The persistence of proteinuria emphasizes the need for long-term monitoring and possibly adjunctive allopathic therapies to prevent further renal damage.

## Conclusion

Nephrotic syndrome needs a multidimensional approach, especially in chronic and recurrent cases. This case presents the potential of integrating Ayurvedic therapies for symptomatic relief and improvement in quality of life. Combined efforts and regular follow-ups across medical systems are essential to achieve maximum outcomes.

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